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Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT: Wagoner Advanced Group, Inc. (Proposed corporate name - must include suffix)				
		9E	0002632569 -09/04/98-01101-001 *****78.75 ******78.	75 75
Enclosed is an original and one(1) copy of the articles of incorporation and a check for:				
\$70.00 Filing Fee	*## \$78.75 Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate	
		ADDITIONAL CO	PY REQUIRED	
FROM: Lucia A. Wagoner Name (Printed Styped)				
13515 Kedlestone Ct.E. 景等				
Jacksonville, FL 32225  City, State & Zip  904-366-4590				
		66 - 4590 Telephone number	8: 22 STATE LORIDA	

Phologo

NOTE: Please provide the original and one copy of the articles.

## ARTICLES OF INCORPORATION

FILED

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

98 SEP -4 AM 8: 22 SECRETARY OF STATE

TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

Wagoner Advanced Group, Inc.

PRINCIPAL OFFICE ARTICLE II

The principal place of business and mailing address of this corporation shall be:

12515 Kediestone Ct. E. Jacksonville, FL 32225

SHARES ARTICLE III\_

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

50 shares; par value \$1.00 per share

INITIAL REGISTERED AGENT AND STREET ADDRESS ARTICLE IV

The name and Florida street address of the initial registered agent are:
LUCIA A. Wagoner
12515 Kedlestone Ct.E.

Jacksonville, FL 32225

INCORPORATOR ARTICLE V

The name and address of the incorporator to these Articles of Incorporation are:

Mrs. Lucia A. Wagoner 12515 Kedlestone Ct. E. Jacksonville, FL 32225

(An additional article must be added if an effective date is requested.)

Havifts been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent

Signature/Registered Agent